

## **DECLARATION AND POWER OF ATTORNEY** FOR PATENT APPLICATION

ATTORNEY DOCKET NO. 10030088-1

As a below named inventor, I hereby declare that:

My residence/post office address and citizenship are as stated below next to my name;

| joint inventor (if plural<br>patent is sought on the         | names<br>e invent             | are listed below) of th                                    | e subject matter whi   | below) or an original, first and ich is claimed and for which a   |  |  |
|--|-------------------------------|--|--|---|--|--|
|  |                               |  |  | <del></del>   |  |  |
| •  |                               | ttached hereto unless the                                  | <del>-</del>   |   |  |  |
| ( ) was filed on _<br>Number                                 | and                           | as US Appli<br>was amended on                              | cation Serial No. or P<br>(if a                                      | CT International Application applicable).   |  |  |
| including the claims, a                                      | as amen                       |  | it(s) referred to abov   | above-identified specification, e. I acknowledge the duty to CFR 1.56.  |  |  |
| Foreign Application(s) and/o                                 | r Claim of                    | Foreign Priority   |  |   |  |  |
| inventor(s) certificate listed                               | below and                     |  | any foreign application for  | any foreign application(s) for patent or<br>patent or inventor(s) certificate having  |  |  |
| COUNTRY  |                               | APPLICATION NUMBER   | DATE FILED   | PRIORITY CLAIMED UNDER 35 U.S.C. 119  |  |  |
|  |                               |  |  | YES: NO:  |  |  |
|  | 1                             |  |  | YES: NO:  |  |  |
| Provisional Application                                      |                               |  | <del></del>  |   |  |  |
| I hereby claim the benefit ubelow:                           | ınder Title                   | e 35, United States Code Sec                               | ction 119(e) of any United   | States provisional application(s) listed  |  |  |
|  | AF                            | PPLICATION SERIAL NUMBER                                   | FILING DATE  |   |  |  |
|  |                               |  |  |   |  |  |
|  |                               |  |  |   |  |  |
| information as defined in Tit                                | le 37, Co                     |  | ction 1.56(a) which occur  | nowledge the duty to disclose material red between the filing date of the prior   |  |  |
| APPLICATION SERIAL NUM                                       | BER                           | FILING DATE  | STATUS (patented/pending/abandoned)                                  |   |  |  |
|  | · · ·                         |  | <u> </u>   |   |  |  |
|  |                               | ļ  | <u> </u>   |   |  |  |
| L  |                               | <u> </u>   |  |   |  |  |
|  |                               | oint the following attorney(s) Office connected therewith: | ) and/or agent(s) to prose   | ecute this application and transact all   |  |  |
| Customer Number  |                               | 022878   | Place Customer<br>Number Bar Code                                    | 7   |  |  |
|  |                               |  | Label here   | _}  |  |  |
| Send Correspondence to                                       |                               | Direct Telephone Calls                                     | То:  | <del></del>   |  |  |
| AGILENT TECHNOLOGII Legal Department, DL42                   |                               | Timothy H. Joyce   | or   | ì   |  |  |
| Intellectual Property Adr                                    |                               | n (650) 485-4310   |  |   |  |  |
| P.O. Box 7599<br>Loveland, Colorado 805                      | 37-0599                       | (000, 100 1010   |  |   |  |  |
| made on information with the knowledge imprisonment, or both | and be<br>that wi<br>n, under | lief are believed to be illful false statements            | true; and further that<br>and the like so ma<br>18 of the United Sta | are true and that all statements at these statements were made are punishable by fine or ates Code and that such willful at issued thereon. |  |  |
| Full Name of Inventor: Ph                                    | illip W. I                    | Barth  | Citizenship: US  | <u> </u>  |  |  |
| Residence: 8   | 11 Way                        | side Road, Portola Valle                                   | y, CA 94028  |   |  |  |
| Post Office Address: S                                       | ame As                        | Residence  |  |   |  |  |

Date

## DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION (continu d)

ATTORNEY DOCKET NO. 10030088-1

| Full Name of # 2 joint inventor: | Carl A. Myerholtz            |               | Citizenship:  | US       |
|----------------------------------|------------------------------|---------------|---------------|----------|
| Residence:                       | 18644 Loree Ave., Cupertino, | CA 95014      |               |          |
| Post Office Address:             | Same As Residence            |               | <del></del>   | <u> </u> |
|                                  |                              |               |               |          |
| Inventor's Signature             |                              | Date          |               |          |
| Full Name of # 3 joint inventor  | :                            |               | Citizenship:  |          |
| Residence:                       |                              |               | <u>-</u>      |          |
| Post Office Address:             |                              |               | <del></del>   |          |
| Inventor's Signature             |                              |               |               | ·        |
| inventor's Signature             |                              | Date          |               |          |
| Full Name of # 4 joint inventor  | •                            |               | Citizenship:  |          |
| Residence:                       | :                            |               | _             |          |
| Post Office Address:             |                              |               |               |          |
|                                  |                              |               |               |          |
| Inventor's Signature             |                              | Date          |               |          |
|                                  |                              |               | o             |          |
| Full Name of # 5 joint inventor  | :                            |               | Citizenship:  |          |
| Residence:                       |                              | <del></del> . |               |          |
| Post Office Address:             |                              |               |               |          |
| Inventor's Signature             |                              | Date          |               |          |
|                                  |                              |               |               |          |
| Full Name of # 6 joint inventor  | ·                            |               | Citizenship:_ |          |
| Residence:                       |                              |               |               |          |
| Post Office Address:             |                              |               |               |          |
| Inventor's Signature             |                              | Date          |               |          |
|                                  |                              |               |               |          |
| Full Name of # 7 joint inventor  | r:                           |               | Citizenship:  |          |
| Residence:                       |                              |               |               |          |
| Post Office Address:             |                              |               |               |          |
| Inventor's Signature             |                              | Date          |               |          |
| -                                |                              |               |               |          |
| Full Name of # 8 joint invento   | r:                           |               | Citizenship:  |          |
| Residence:                       |                              |               |               |          |
| . Post Office Address:           |                              |               |               | <u></u>  |
| Inventor's Signature             |                              | <del></del>   |               |          |
| medicor a digitature             |                              | Date          |               |          |